ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
SEE DETERMINATION		 	-	
FEE DETERMINATION O.I.P.E. CLASSIFIER			 	
FORMALITY REVIEW				
RESPONSE FORMALITY REVIEW				
· // INDEX OF CLAIMS				
///	Rejected	N		
=(Through numeral).	Canceled	A		
\$d ÷	Restricted	0	Objected	
Ctaim 2 Date	Claim I	Date	Claim Date	
SWITTE				\Box
	Final Original		Final Original	
# 5 6 % 3	51	┤┤┤ ┼┤╎	101	+++-
	52		102	
	53	╶┤ ╌╂╌╂╌┦╌┦╴┠	103	+++
	55		106	
6	56	╌┼╌┼╌┼╌┤╴├	108	+++-
	58	 	108	
9	59		110	
10	60	┤ ┼┼┼┼	111	+++
12	62		112	
13	63 64	╌╀╌╂╌╂╌┦╌┤	113	-{-}- {-
15	65		115	
16	66		116	╁┼┼┥
17	68	·╆╶╂ ╶╂╶╂	118	
19	69		119	
20	70 71	┤ ┼┼┼┼┤┞	120	+++
21 22	72		122	
23	73 74	 	123	╀╃╃┩
24 25	75	┤ ┼┼┼┼┤	125	
26	78		126	$\Box\Box$
28	77	╶╋╌╏╌╏╶╏╸ ┩╴╏	127	╂═╂╌┨
29	79		129	
30	80 81	╺╂╺╂╶╂╶┦ ╶┦	130	╅┼┾┤
32	82		132	
33	83	╅╅╁╄┼┤┞	133	╃╃╃
34 35	85	▗╅╶ ╁╌╂╌╂╌┦╴┞	135	
36	86		136	4-1-1-1
37	87	╶┨╶╂╌╂╌╏ ╴┠	137	+++
39	89		139	Π
40	90	▗ ╏ ╁╂┼┼┤╎	140	╅┼┼┼┤
41 42	92	· ╆╍╂╌┨	142	
43	93		143	+++
44 45	94	╶╂╏ ┼┼┼┤	145	1-1-1-1
46	96		146	TT
47 48	97 98	╼╂╌╂╼╂╌╂╾┦╴┠	148	╁╁┼┤
49	99		149	
50	100		150	لللل

If more than 150 claims or 10 actions staple additional sheet here

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